

**Dan Bernal**  
President

**Laurie Green, M.D.**  
Vice President

**Edward A. Chow, M.D.**  
Commissioner

**Susan Belinda Christian, J.D.**  
Commissioner

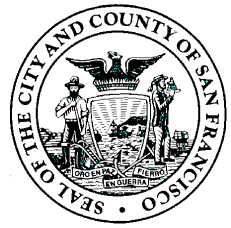
**Cecilia Chung**  
Commissioner

**Suzanne Giraudo ED.D**  
Commissioner

**Tessie M. Guillermo**  
Commissioner

## **HEALTH COMMISSION CITY AND COUNTY OF SAN FRANCISCO**

**London N. Breed Mayor**  
**Department of Public Health**



**Grant Colfax, MD**  
Director of Health

**Mark Morewitz, M.S.W.**  
Executive Secretary

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### **MINUTES**

#### **HEALTH COMMISSION MEETING**

**Tuesday, September 7, 2021 4:00 p.m.**

**Remote Meeting via Webex Event**

#### **1) CALL TO ORDER**

Present: Commissioner Dan Bernal President  
Commissioner Laurie Green, MD, Vice President  
Commissioner Edward A. Chow M.D.  
Commissioner Cecilia Chung (  
Commissioner Susan Belinda Christian, J.D.  
Commissioner Suzanne Giraudo, Ph.D  
Commissioner Tessie Guillermo (Left meeting at 6:25pm)

The meeting was called to order at 4:06pm.

#### **2) APPROVAL OF THE MINUTES OF THE HEALTH COMMISSION MEETING OF AUGUST 17, 2021.**

Action Taken: The Health Commission unanimously approved the August 17, 2021 minutes.

#### **3) DIRECTOR'S REPORT**

Grant Colfax, MD, DPH Director of Health, presented the item.

##### **DPH releases 2020 HIV Epidemiological Report**

On August 30, DPH released the 2020 HIV Epidemiology Annual Report that outlines the continued progress towards San Francisco's goal of zero HIV infections and HIV-related deaths, while also highlighting the impact of the COVID-19 pandemic on HIV care and prevention and the disparities in care among Black/African Americans and people experiencing homelessness.

Evidence from the report points to a continuing decline in new HIV diagnoses, but also a reduction in the number of HIV screening tests and viral load tests that were conducted. The declines in HIV care among people living with HIV (PLWH), particularly among persons experiencing homelessness, is of concern.

"The data from this annual report shows us that there was a high level of rapid engagement in care and viral suppression among those with HIV maintained in the first year of the COVID-19 pandemic," said Director of Health, Dr. Grant Colfax. "However, we also see a concerning decline in the number of HIV screening tests that

were conducted during the pandemic. This means that some San Franciscans may have had a delay in finding out their HIV status or may not yet be aware that they are living with HIV.”

New HIV diagnoses continued to decline by 22 percent, from 168 diagnoses in 2019 to 131 diagnoses in 2020 – compared to an 18 percent decline from 2018 to 2019. However, there was also a comparable 18 percent decline in the average monthly HIV screening tests at select medical sites in 2020.

While the linkage to care for new HIV diagnoses remained high at 92 percent, the receipt of care (76%) and viral suppression (70%) were lower than in 2019 (81% and 75% respectively). Disparities in care outcomes remained, especially among vulnerable populations. For example, viral suppression among people experiencing homelessness dropped from 39% in 2019 to 20% in 2020. Additionally, viral suppression was lower among women, trans women, Black/African Americans, and persons who inject drugs.

To increase access to HIV testing, SFPDPH has resumed low-barrier access to testing at drop-in clinics and community sites, and has launched a home testing program, [Take Me Home](#), through which San Franciscans can access free, home-based HIV and sexually transmitted infection (STI) testing. SFPDPH is also partnering with community organizations to establish mobile health access points where people can receive prevention, testing and treatment for HIV, STIs, Hepatitis C, overdose prevention, and linkage to substance use and mental health services. SFPDPH’s efforts to increase testing and access to treatment will continue so as to ensure timely diagnosis, linkage to care, and viral suppression.

“Our homeless and unhoused population was disproportionately affected by the structural effects of COVID-19 and our data shows that their HIV-related health care suffered as well,” said Dr. Colfax. “We will continue to monitor the impact of COVID-19 on delayed diagnosis and care outcomes in San Francisco using surveillance data in coming reports.”

For more information about the 2020 HIV Epidemiology Annual Report, read the full version [here](#).

### **Bay Area Health Officers Reaffirm Support for Full In-Person School**

On August 26, the Association of Bay Area Health Officers—including San Francisco’s Dr. Susan Philip—released the following joint statement reaffirming their support for full-time in-person schooling for students: “As Bay Area Health Officials, we are excited that more than a million Kindergarten-12th grade students are returning to school for in-person learning this fall across the wider San Francisco Bay Area. In the counties of Alameda, Contra Costa, Marin, Monterey, Napa, San Benito, San Francisco, San Mateo, Santa Clara, Santa Cruz, Solano, Sonoma, and the City of Berkeley, many children are back in the classroom for the first time since early 2020.

This summer’s surge in COVID-19 cases and hospitalization due to the spread of the Delta variant is causing people to feel cautious about the return to school. We know that when rates of COVID are high in our communities, cases will appear at schools, just as they do in other settings. However, with effective protocols in place – including universal indoor masking, vaccinations of eligible persons, testing, good hand hygiene, staying home when sick and proper ventilation – the data shows that these multiple layers of defense can stop the spread of COVID in school settings.

In considering the many benefits to children, Bay Area Health Officials reaffirm the joint Bay Area Health Officials’ statement from June, endorse the recent statement from Bay Area County Superintendents of Schools, and continue to firmly support a safe return to the classroom.

The lack of in-person learning during the COVID-19 pandemic not only disrupted education, but it also weakened social supports and harmed the mental health of students. The risks and benefits of returning to in-

person learning are clearer now than any other time during this pandemic – we must all continue to do everything possible to keep kids safely attending their schools.

While children can get COVID-19, severe disease among kids is uncommon and deaths are exceedingly rare. Transmission can happen in any setting, including in schools, but children are often exposed to COVID-19 at home or in social settings where safety practices vary. Cases identified by school testing programs may often be unrelated classroom exposure.

In San Francisco, we are seeing cases of COVID-19 among children however the percentage of pediatric cases has been consistent over time including this most recent surge. For the previous school year (2020-2021), there were seven cases of COVID transmission in all schools in San Francisco with in-person learning among 48,000 students and teachers, including the San Francisco Unified School District. All other cases reported at schools were related to community transmission outside of school. This was even during the height of our winter surge. Moreover, there have been no verified outbreaks in San Francisco camps and learning hubs this summer.

San Francisco has one of the highest vaccination rates in the nation with 79% of our eligible population fully vaccinated. Impressively, 99% of our 12 to 17-year-olds have received at least one dose of the vaccine. Middle and high schools will be safer because of the high vaccination rates among teens in San Francisco.

The [State's K-12 Schools Guidance for the 2021-22 School Year](#) is practical guidance that emphasizes universal application of the most important safety measures while also offering flexibility for different approaches to meet the needs and capacities of a broad range of schools and districts seeking to safely keep children in classrooms.

School leaders have worked hard to implement this Guidance and are ready to welcome students back. Health Officials continue to monitor the data closely and we will work across the region and the state to adapt when needed.”

#### **COVID vaccine event in the tenderloin serving Latino families to support a safe return to school**

On August 20, Director of Health Dr. Grant Colfax announced that a drop-in vaccine event would be held on Saturday, August 21 from noon to 3:00 p.m. at 246 Eddy Street in partnership with, UCSF, University of San Francisco School of Nursing and Health Professions, SFUSD and community service providers. Both Pfizer and Johnson & Johnson were available, administered free of charge by bilingual (Spanish/English) staff, and appointments for second doses were scheduled on site.

The event offered educational information about the benefits of vaccination for all family members 12 and older, as well as in preparation for pediatric vaccination of children 2-11, anticipated in late fall or winter. Parents and their children who have been trained as “vaccine ambassadors” and already having been vaccinated themselves, shared their experience and knowledge with attendees, and were available on site to welcome families and answer questions in Spanish, with support from health care workers. Participants received gift cards, as did all attendees who got vaccinated. This model is a pilot project which, if successful, will be replicated in other languages and neighborhoods, to reach additional monolingual and bilingual families.

#### **San Francisco offers third dose of Pfizer or Moderna vaccines to immunocompromised people**

On August 18, DPH began offering a third dose of the Pfizer-BioNTech or Moderna COVID-19 mRNA vaccines to individuals who meet specific criteria for immunocompromised health conditions, such as active cancer treatment, organ transplant, advanced HIV infection, and others.

DPH's new health advisory aligns with recent guidance from the U.S. Centers for Disease Control and Prevention (CDC) and the California Department of Public Health (CDPH) and is a response to vaccine trials showing that many people with moderate to severe immunosuppression would benefit from a third dose of the mRNA vaccine series to increase their protection against COVID-19.

Patients should first consult with their health care provider about their medical condition and whether getting an additional dose is appropriate and safe for them. Eligible individuals should first seek out third doses through their health care providers, if they have one. Doses will also be available through DPH-affiliated sites and the San Francisco Health Network. When presenting at a DPH or affiliated site an individual must self-attest to having one of the following, specific conditions:

- Receiving active cancer treatment for tumors or cancers of the blood
- Received an organ transplant and am taking medicine to suppress my immune system
- Received a stem cell transplant within the last 2 years or am taking medicine to suppress the immune system
- Moderate or severe primary immunodeficiency (e.g., DiGeorge syndrome, Wiskott-Aldrich syndrome)
- Advanced or untreated HIV infection
- Active treatment with high-dose corticosteroids or other drugs that suppress my immune response

People who are immunocompromised have a reduced ability to fight infections and are vulnerable to COVID-19. The U.S. Food and Drug Administration (FDA) has determined that the administration of a third dose may increase protection from the virus for individuals with these health conditions. Because the vaccine is not 100% effective, persons with immune compromise, including those who receive a 3<sup>rd</sup> dose, should continue to take additional precautions to prevent COVID infection, including wearing a well-fitted facemask, maintaining social distancing, and avoiding crowds and poorly ventilated indoor spaces whenever possible. Their close contacts should be strongly encouraged to be vaccinated against COVID-19.

Based on CDC estimates that approximately 3% of the population meets the criteria, DPH expects the number of individuals eligible for a third dose to be relatively small.

San Francisco's protocol remains the same in accommodating special requests from individuals who have received the Janssen (Johnson & Johnson; J&J) viral vector COVID-19 vaccine and who have consulted with a healthcare provider and wish to receive a supplemental dose with an mRNA vaccine (Pfizer or Moderna). Supplemental doses are being provided through Zuckerberg San Francisco General Hospital and other SFDPH-operated vaccination sites to San Francisco residents and to people who can prove they were vaccinated with the J&J vaccine in San Francisco.

Immunocompromised individuals can make an appointment or find a nearby vaccination site at [sf.gov/getvaccinated](https://sf.gov/getvaccinated). To stop the spread of COVID-19 and protect individuals who are immunocompromised, DPH is strongly encouraging everyone who is eligible to get vaccinated, to do so now.

San Francisco's Health Advisory for a third dose of mRNA vaccine for immunocompromised can be found here: <https://sf.gov/getvaccinated>.

### **San Francisco to open high volume testing site in response to rise in COVID-19 cases**

On August 16, Mayor London N. Breed and DPH announced the opening of a high-volume testing site for COVID-19 at 7th and Brannan Streets in the South of Market neighborhood. The site will support the City's demand for testing as an important tool to slow the spread of the virus and support a timely return to work and school for individuals exposed to COVID-19.

The site opened on August 18 with the capacity to administer 500 tests per day from 9 a.m. to 6 p.m., seven days a week by appointment only. Drive-thru and walk-up services are available, and test results will be ready

within 24 to 48 hours. The operation will start with two teams and grow to five by the end of August, allowing for as-needed, additional demand for testing.

DPH is reserving appointments slots for disaster service workers who have been exposed to the virus as close contacts and for individuals involved in potential outbreaks of three or more individuals from separate households. The general public may make appointments but are strongly encouraged to first seek tests from their health care provider if they have one or purchase rapid home-testing kits that have become widely available.

DPH also launched the COVID Resource Center to offer isolation and quarantine support for those who test positive for COVID-19 or are in close contact, including temporary housing, food delivery, cleaning supplies, and financial assistance for those who need it. The service can be reached at 628-217-6101.

Additionally, DPH issues a health order requiring large healthcare facilities in the City to provide testing for patients, specifically those entities with acute care hospitals and associated clinics, offices, or urgent care centers, and medical practices with at least 100 licensed healthcare providers. The order is designed to ensure that private health providers contribute fully to the City's COVID-19 testing infrastructure.

The testing site brings the City's current capacity to approximately 5,000 tests per day, provided by the San Francisco Health Network (SFHN) and other community and DPH-affiliated sites for individuals who are uninsured or who otherwise lack access to care. Of all analyzed tests in the City for San Francisco residents, DPH is currently administering 29%, though the SFHN is the primary provider for less than 10% of the population in San Francisco. The City's testing volume between CityTest, Community sites and SFHN sites is 5 to 10 times what each of the private health systems is doing daily.

The SoMa testing site is a partnership between DPH and Color Health, which is providing testing services, and Carbon Health, which is providing staffing.

San Francisco follows the recently updated CDC guidance which recommends people who are fully vaccinated get tested three to five days after a potential exposure even if they have no symptoms. People who are not fully vaccinated should be tested immediately after being identified, and, if negative, be tested again in 5 to 7 days after their last exposure or immediately if symptoms develop during quarantine.

To make an appointment at the SoMa testing site, or to find other testing sites that are free of charge, no insurance required, visit [sf.gov/gettested](https://sf.gov/gettested). Individuals with a health care provider should schedule a test with them.

Individuals testing positive for COVID-19 or who are identified as a close contact to someone who has tested positive, will receive a link to the CalConnect Virtual Assistant (called the "VA"); we request that all San Franciscans who receive this link complete it. For information on what to do after a positive COVID test or exposure to the virus, go to: [sfdph.org/dph/COVID-19/Isolation-and-Quarantine.asp](https://sfdph.org/dph/COVID-19/Isolation-and-Quarantine.asp).

#### **DPH's Veronica Shepard awarded the CBS Jefferson Award**

Veronica Shepard, the Population Health Director of the Office of Anti Racism and Equity has been awarded the Jefferson Award in the Bay Area for her work with the San Francisco African American Faith Based Coalition (SFAAFBC). During the pandemic, the SFAAFBC delivers food to over 800 families in San Francisco each week. Veronica, the SFAAFBC, and many partners also organized a Feeding the 5,000 Christmas holiday event last year, giving away turkey and other food to 5,000 households. They plan to repeat the project with their community partners this winter.

### **DPH's Seth Pardo featured in APA's Monitor in Psychology**

Gender Health SF is a program of DPH's Behavioral Health Services whose mission is to increase access to quality gender-affirming health care for underserved transgender and non-binary people in San Francisco, regardless of immigration status and/or level of income. The program's lead program evaluator, Seth Pardo, PhD, featured in a recent American Psychological Association's Monitor in Psychology article highlighting how real-world data is used in health systems and program interventions.

"A signature program is Gender Health SF, which promotes access to medical care for uninsured and underinsured transgender people, including undocumented immigrants. Thanks to the team's data-driven approach, the program now provides evidence-based wraparound services for those considering gender-affirming surgery. A central feature is a cadre of peer supporters who walk patients through every step of the process, connecting them with medical and mental health professionals and resources and providing emotional support," explained Pardo.

The team's analysis and curation of real-world program data—which are showing large improvements in patients' physical health, mental health, and functioning—made it possible to expand and ultimately gain full insurance reimbursement for the program, Pardo said. Yet its true benefits can't be captured in numbers, he said.

"We hear people in these communities say, 'This program saved my life,'" he said. "We know that suicide rates are really high in this community, and we have had very few in our population."

Kudos to Dr. Seth Pardo and Gender Health SF for championing DPH's commitment to using data and evaluation efforts to deliver life-saving trans care services to our most vulnerable trans and nonbinary communities in San Francisco.

### **DPH's new Director of Communications – Alison Hawkes**

In mid-August, following a full recruitment and hiring process, DPH selected Alison Hawkes to be the Department's new Director of Communications. Alison has been a part of the DPH Communications team since April 2021, previously working closely with the Behavioral Health Team. She comes to DPH with two decades of experience in journalism. Immediately prior to joining DPH, Alison was the Lead Public Affairs Specialist at NASA's Ames Research Center. Congratulations, Alison, on your new role!

### **SFDPH in the News**

#### **Commissioner Comments:**

Commissioner Chow requested that Mr. Morewitz include the link to "SFDPH in the News" when sending COVID data to the Health Commissioners.

#### **4) COVID-19 UPDATE**

Grant Colfax, MD, DPH Director of Health, presented the item.

#### **Commissioner Comments:**

Commissioner Giraudo asked if there is testing data delineating when there is a possible exposure or testing required by work. Director Colfax stated that there is no metric to measure and track the testing data at that granular level at this time. He reiterated that the DPH is encouraging everyone to use their primary medical provider for routine testing and to only use City testing sites as a last resort.

Commissioner Green asked how the DPH is planning on the possibility of implementing vaccinations for children aged 5-12 at the same time as booster shots for adults who have already received their vaccination.

Director Colfax stated that it is unclear what the timing for both will be. Planning is being done to address these two areas as well as flu vaccines. He added that the current priority is unvaccinated individuals of all ages and booster shots for those who are immune compromised.

Commissioner Green asked if pharmacies can be helpful in the vaccination process. Director Colfax stated that he expects pharmacies to play key roles in upcoming vaccination distribution.

Commissioner Chow stated that he is aware of 30 private medical providers who have been approved through CalVax to provide vaccines. Director Colfax stated that he is delighted that private providers are able to navigate the complex CalVax system and noted the current supply of vaccine is robust.

Commissioner Chow stated that his understanding is that large health systems are not going to cover COVID-19 tests for work or travel. He noted that this may result in more use of the city testing sites. Director Colfax stated that the DPH has been working with health care systems to plan for these issues. He added that it would be unfair for the City to pay for insured individuals to use the City test sites for work and travel.

**5) GENERAL PUBLIC COMMENT**

There was no general public comment.

**6) POPULATION HEALTH DIVISION UPDATE**

Susan Philip, MD, MPH, Acting Director and Health Officer, presented the item.

Commissioner Comments:

Commissioner Chow thanked Dr. Philip for the wonderful presentation. He asked whether Population Health Division (PHD) staff helped develop the City's COVID-19 posters. Dr. Philip stated that the posters are part of the COVID Task Force work, noting that some PHD staff were involved in the development process.

Commissioner Guillermo thanked Dr. Philip for the presentation and for fulfilling her dual roles as Health Officer and Acting Director of Population Health. She is grateful for the contribution San Francisco is making to the field of public health, noting that the DPH has helped frame important public health issues for the rest of the country through research, professional papers, and practices.

Commissioner Christian stated that she appreciates the emphasis on the workforce pipeline, noting how central this work is to the DPH being successful in shifting inequalities in its system. She also noted that PHD is reframing and expanding the definition of what public health is and the places it reaches, to contribute to a more healthy society.

Director Colfax thanked Dr. Philip for her leadership and noted that the DPH needs to make investments in the PHD infrastructure to ensure staff are supported in their important public health work.

**7) RESOLUTION: HONORING THE IMPORTANCE OF THE HEALTH COMMISSION HEARING FROM DIVERSE COMMUNITY VOICES AND CODIFYING ITS COMMITMENT TO AN ANNUAL MEETING IN THE COMMUNITY**

Mark Morewitz, Health Commission Executive Secretary, presented the item.

Commissioner Comments:

Commissioner Bernal noted that the resolution commits the Health Commission to one meeting in the community. He hopes that it will have opportunities to have more than one community meeting per year. He noted that the ability to take a deep dive into the neighborhood data and hear from the community helps to identify disparities and ways to address them.



Action Taken: The Health Commission unanimously approved the resolution. (See attachment)

**8) PROPOSED REVISIONS TO THE HEALTH COMMISSION RULES AND REGULATIONS**

Mark Morewitz, Health Commission Executive Secretary, presented the item.

Commissioner Comments:

Commissioner Green requested that virtual meetings be addressed in section 3A. Mr. Morewitz stated that he would draft language to address these types of meetings.

Commissioner Chow asked for clarification from the City Attorney regarding the status of Commissioners attending meetings remotely once the emergency declaration is over. Mr. Morewitz stated that he would check with the City Attorney on this issue.

**9) FINANCE AND PLANNING COMMITTEE UPDATE**

Commissioner Chung, Chair, stated that the committee reviewed the items on the Consent Calendar and recommended that the full Health Commission approve them.

**10) CONSENT CALENDAR**

Action Taken: The Health Commission unanimously approved the following:

- **SEPTEMBER 2021 CONTRACTS REPORT**
- **REQUEST FOR APPROVAL OF A NEW CONTRACT WITH SPENDMEND, LLC TO PERFORM 340B DRUG PRICING PROGRAM CONSULTING SERVICES. THE TOTAL PROPOSED CONTRACT AMOUNT IS \$427,840 WHICH INCLUDES A 12% CONTINGENCY FOR THE TERM OF OCTOBER 1, 2021 THROUGH SEPTEMBER 30, 2025 (4 YEARS).**

**11) OTHER BUSINESS:**

This item was not discussed.

**12) JOINT CONFERENCE COMMITTEE AND OTHER COMMITTEE REPORTS**

Commissioner Chow, ZSFG JCC chair, stated that at the August 24 ZSFG JCC meeting, the committee discussed two significant presentations.

- The Equity Presentation gave an overview of the robust program at ZSFG. The hospital is hoping to hire a Director of Equity and Inclusion in the next few months, to ensure leadership in this realm continues.
- The Workplace Violence Prevention Update was also a thorough review of this important topic. ZSFG continues to bring innovation in this area as the patient population continues to exhibit great behavioral health and substance use issues that impact the safety of ZSFG workers and patients.

In addition, the committee reviewed the Regulatory Affairs Report, CEO Report, and HR Report. The nation-wide nursing shortage is impacting staffing levels at ZSFG. The Human Resources staff continue to try creative avenues to recruit an experienced and diverse workforce. In closed session, the committee approved the Credentials Report and the report of the PIPS minutes.

**13) CLOSED SESSION –Litigation & Personnel:**

- A). Public comments on all matters pertaining to the closed session



- B). Vote on whether to hold a closed session (San Francisco Administrative Code Section 67.11) and to invoke the attorney-client privilege (San Francisco Administrative Code Section 67.10 (b)(d))
- C). **CONFERENCE WITH CITY ATTORNEY**  
Convene in Closed Session - Existing Litigation - Motion that the Health Commission convene in closed session with the City Attorney for the purpose of conferring with, or receiving advice from, the City Attorney regarding the following existing lawsuit in which a proposed settlement is being considered by the Health Commission, pursuant to San Francisco Administrative Code Section 67.10(d) and California Government Code Sections 54956.9 and 54956.9(e)(3) permit this closed session. Discussion in open session concerning these matters would likely and unavoidably prejudice the position of the City in the pending lawsuit listed below.
1. Settlement of Unlitigated Claim: Covidien Sales LLC, a Medtronic Company ("Medtronic") - City to receive \$800,000.00 per Full and Final Release in exchange for the City's return of the ventilators at Medtronic's cost. (Action Item)
  2. Settlement of Unlitigated Claim: Sandeep K. Lal - City to pay \$59,000.00.  
  
Sandeep K. Lal, Charging Party, vs. City and County of San Francisco, Respondent. Filed on December 6, 2019 (State of California Public Employment Relations Board, Case No. SF-CE-1682-M); EEOC Charge No. 37A-2021-00427-C (Action Item)
  3. Settlement of Litigation: David Joslyn - City to pay \$3,250,000.00.  
  
David Joslyn, an individual; and Iris Solano, an individual, Plaintiffs, vs. City and County of San Francisco, a government entity; Paul Hausknecht, M.D., an individual; Louis Yu, M.D., an individual; Dwayne Adams, R.N., an individual; Grace Massa, R.N., an individual; Chelsea Nash, R.N., an individual; Brian Cross, R.N., an individual; and Does 1-20, inclusive, Defendants. Filed on October 2, 2019 (San Francisco Superior Court, Case No. CGC-19-579230) (Action Item)
- D). Closed Session pursuant to California Government Code Section 54957(b) and San Francisco Administrative Code Section 67.10(b):
- PUBLIC EMPLOYEE PERFORMANCE EVALUATION:**  
DIRECTOR OF HEALTH-GRANT COLFAX, MD
- E). Reconvene in Open Session: Motions and vote on whether to disclose any or all of the closed session discussions, San Francisco Administrative Code Section 67.12(a)

Action taken: The Health Commission unanimously voted to not disclosed discussions held in closed session.

#### **14) ADJOURNMENT**

The meeting was adjourned at 6:46pm.

**Attachment**

**Health Commission  
City and County of San Francisco  
Resolution 21-10**

**HONORING THE IMPORTANCE OF THE HEALTH COMMISSION HEARING FROM  
DIVERSE COMMUNITY VOICES AND CODIFYING ITS COMMITMENT  
TO AN ANNUAL MEETING IN THE COMMUNITY**

WHEREAS, The San Francisco Health Commission (Health Commission) is the Governing Body of the San Francisco Department of Public Health; and

WHEREAS, The Health Commission Rules and Regulations state, “All Commission meetings shall be open and public, and all persons shall be permitted to attend any meeting of the Commission,” and “Members of the public are encouraged to attend the meetings and address the Commission on the items under consideration; and

WHEREAS, many individuals and community groups participate in Health Commission meetings by providing written and verbal public comment; and

WHEREAS, the San Francisco Department of Public Health (DPH) regularly reports to the Health Commission on its partnerships with the many diverse communities in San Francisco to conduct needs assessments, planning efforts, and to implement activities and programs designed to address health disparities; and

WHEREAS, the DPH contracts approximately \$400 million annually with community organizations to provide a range of public health related services such as medical care, behavioral health services, and substance treatment services. As part of the contract approval process, these community organizations, serving the many diverse San Francisco communities, are invited to Health Commission meetings to present their programs and answer questions from the Commissioners; and

WHEREAS, the Health Commission has historically held at least one meeting per year in a specific neighborhood in order to focus the meeting agenda on topics related to public health issues, data, and services for those communities residing in the neighborhood; and

WHEREAS, The DPH provides in depth analysis of public health data and programs for the neighborhood in which the Health Commission holds its annual community meeting. The DPH partners with local community organizations and groups to develop a presentation of community-level activities which is presented as part of the Health Commission annual community meeting. The DPH also conducts outreach to invite local residents to participate in the Health Commission community meetings.

THEREFORE, BE IT RESOLVED, that the Health Commission shall codify its tradition to hold at least one in-person or virtual meeting each year, focusing on the public health needs of the diverse communities living in one neighborhood; and

FURTHER RESOLVED, That the Health Commission will rotate neighborhoods for the location of these annual meetings in an effort to ensure inclusion of all neighborhoods.

I hereby certify that the San Francisco Health Commission at its September 7, 2021 meeting adopt the foregoing resolution.

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Mark Morewitz, MSW  
Health Commission Executive Secretary